FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

SECTION 4(6), AND/OR LINIFORM LIMITED OFFERING EXEMPTION 383609

OMB APPROVAL OMB Number: 3235-0076 April 30, 2008 Expires: Estimated average burden Hours per response: 16.00

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D	TE RECEIV	ED

	CHILORAL ENVITED OF LIGHT CON	
Name of Offering (check Brigadier Capital L	if this is an amendment and name has changed, and indicate chang ${f P}$	e.)
Filing Under (Check box(es) th	nat apply): Rule 504 Rule 505 Rule 506 Section	on 4(6) ULOE
Type of Filing: New Fi		WE OF TOOMS PER
	A. BASIC IDENTIFICATION DATA	
Enter the information reques Name of Issuer (check if the Brigadier Capital L	is is an amendment and name has changed, and indicate change.)	SECTION E
Address of Executive Offices (N	Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
	t, 21st Fl., New York, NY 10022	212-861-7878
Address of Principal Business C (if different from Executive Off	Operations (Number and Street, City, State, Zip Code) ices)	Telephone Number (Including Area Code)
Brief Description of Business	To operate as a private investment limited partnership.	<u> </u>
Type of Business Organization	·	PROCESSED
corporation		cr (please specify):
business trust	limited partnership, to be formed	UEC 15 2006
Actual or Estimated Date of Inc	orporation or Organization: Month Year 05 06	☐ THOMSON ☐ EstimalNANCIAL
Jurisdiction of Incorporation or	Organization (Enter two-letter U.S. Postal Service abbreviation fo CN for Canada; FN for other foreign jurisdiction)	r State:
GENERAL INSTRUCTIONS		

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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				TIFICATION DATA		
2.		tion requested for th	•			
	_		ne issuer has been organized	•		
	 Each benefic of the issuer; 		e power to vote or dispose,	or direct the vote or disposition	n of, 10% or more o	f a class of equity securities
	o Each executi	ve officer and direc	tor of corporate issuers and	of corporate general and mana	ging partners of par	tnership issuers; and
	o Each general	and managing part	ner of partnership issuers.			
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General Partner
Full N	ame (Last name first, Brigadier GP LLC					
Busine	ss or Residence Addi	ress (Numbe	er and Street, City, State, Zi	p Code)		
<u> </u>			v York, NY 10022			
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	Managing Member of the General Partner
Full N	ame (Last name first, Cohen Brothers, I	,				
Busine	ss or Residence Addr		er and Street, City, State, Zi	p Code)	<u>- · · </u>	
Check	Box(es) that Apply:	Promoter	V York, NY 10022 Beneficial Owner	Executive Officer	Director	General and/or
						Managing Partner
Full Na	ame (Last name first,	if individual)				
Busine	ss or Residence Addr	ress (Numbe	er and Street, City, State, Zi	p Code)		
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first,	if individual)				
Busine	ss or Residence Addr	ress (Number	er and Street, City, State, Zi	p Code)		
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first,	if individual)	·····		·	
Busine	ss or Residence Addr	ress (Number	er and Street, City, State, Zip	p Code)		
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	nme (Last name first,	if individual)				
Busine	ss or Residence Addr	ess (Numbe	er and Street, City, State, Zij	o Code)	<u></u>	
Check	Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Na	ame (Last name first,	if individual)			····	
Busine	ss or Residence Addr	ess (Numbe	r and Street, City, State, Zip	o Code)		
			*		*****	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

													
					B.	INFORMA	TION AB	OUT OFFE	RING				
1.			d, or does to o in Append					vestors in t	his offering	?	Yes		
2.			num investr					ıa1			<u>\$5</u> (<u>*00,000</u>	
	* S	subject to t	he discretio	n of the Go	eneral Parti	ner to accep	t lesser am	ounts.					
3. 4.	Does th	e offering	permit join	t ownershi	p of a singl	e unit	or will be	naid or giv	en directly	or indirect	Ye		· similar
	remune agent o persons	ration for s f a broker of to be liste	solicitation or dealer re	of purchas gistered wi	ers in conn th the SEC	ection with and/or wit	sales of se h a state or	curities in states, list	the offering the name o	. If a person fithe broken	on to be list r or dealer.		sociated person or an five (5)
Full Na	Applica me (Last		, if individ	ual)									
	-	 											
Busines	s or Res	idence Ado	dress (Num	ber and Str	eet, City, S	state, Zip C	ode)						
Name o	f Associ	ated Broke	r or Dealer										
			ted Has Sol or check in			olicit Purch	asers					□ A1	l States
	(AL) (IL) (MT) [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
			, if individ				,		[··· ·]		£	[]	
Busines	s or Res	idence Ado	iress (Num	ber and Str	ect, City, S	tate, Zip C	ode)						
			r or Dealer			•					<u></u>		
			ted Has Sol or check in			olicit Purch	asers					☐ Al	l States
:	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last	name first	, if individu	ıal)			<u>. </u>				-		<u>.</u>
Busines	s or Res	idence Ado	iress (Num	ber and Str	eet, City, S	tate, Zip C	ode)		<u>.</u> .				
Name o	f Associa	ated Broke	r or Dealer										
			ted Has Sol or check inc			olicit Purch	asers					☐ All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [M!] [OH] [WV]	[GA] [MN] [OK] [WI]	— [HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Enter the aggregate offering price of securities included in this offering and the total amount already so "none" or "zero". If the transaction is an exchange offering, check this box [] and indicate in the col the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt		ς.	30Id 30
	Equity		_	50
	[] Common [] Preferred	40	_	
	Convertible Securities (including warrants)	\$0	•	50
	Partnership Interests		_	37,950,000
	Other (Specify)		_	60
			_	
	TotalAnswer also in Appendix, Column 3, if filing under ULOE.	\$1,000,000,000	- 3	37,950,000
	aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	4	\$	37,950,000
	Non-accredited Investors	0	S	0
	Total (for filing under Rule 504 only)			
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offer type listed in Part C - Question 1.	sold by the issuer, to rring. Classify secu Type of	rities	e, in by Dollar
	Type of Offering	Security		Amount Sold
	Rule 505		_	\$
	Regulation A			\$
				Ψ
	Rule 504			\$
	Total		_	-
١.		t to future continge		\$ \$
١.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities amounts relating solely to organization expenses of the issuer. The information may be given as subject	et to future continge mate.		\$ \$
i.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities amounts relating solely to organization expenses of the issuer. The information may be given as subject the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	et to future continge mate.	ncie:	\$ \$ \$ de s. If
i.	Total	et to future contingermate.	ncie:	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
١.	Total	et to future continge mate. [[ncies	\$ \$ \$ \$ \$ele \$s. If \$ \$\frac{\$50}{\$\$*} \$\$ \$\$*
١.	Total	et to future continge mate	ncies] X] X]	\$ \$ \$ \$ \$ele \$s. If \$ \$\frac{\$50}{\$\$*} \$\$ \$\$*
١.	Total	et to future continge mate	x] X]	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
1.	Total	et to future continge mate	x] X] X]	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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5.	Indicate below the amount of the adjusted gross proceeds to the is purposes shown. If the amount for any purpose is not known, furnestimate. The total of the payments listed must equal the adjusted C - Question 4.b above.	nish an estir	nate	and c	heck the box to th	e left	of the	e o Part
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		[]	\$	[]	<u>\$</u>
	Purchase of real estate		[]	\$	[]	<u>\$</u>
	Purchase, rental or leasing and installation of machinery and equip	pment	[]	\$	[]	\$
	Construction or leasing of plant buildings and facilities		[]	\$	[]	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assesecurities of another issuer pursuant to a merger)	ts or	[]	\$	[]	\$
	Repayment of indebtedness		[]	\$	[]	<u>\$</u>
	Working capital		[]	\$	ſ]	\$
	Other (specify): Investments in Brigadier Capital Master Fund Ltd	d	[]	\$	[x]	\$999,850,000
	Total Payments Listed (column totals added)				[x] <u>3</u>	\$ 999,	850,0	000
	D. FED.	ERAL SIG	TAV	URE				
	ssuer has duly caused this notice to be signed by the undersigned	duly authori Securities a	zed p	excha	nge Commission,	filed upon	unde writt	r Rule 505, the follow en request of its staff, t
na	ture constitutes an undertaking by the issuer to furnish to the U.S. mation furnished by the issuer to any non-accredited investor purs	uant to para	grap	h (b)(
na or	mation furnished by the issuer to any non-accredited investor purs	uant to para	grap	h (b)(,		T	Date
na or ue	mation furnished by the issuer to any non-accredited investor purs	uant to para	grap	l (b)	ey		Г	Date 11-21-06
na or ue	r (Print or Type) adier Capital LP	uant to para	grap	ll	LY or Type)		Г	Date 11-21-06

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

			Apper to the first term of the
1.	Is any party described in 17 CFR 230.262 presently subject	E STATE SIGNATURE	Yes No
	See Appendix, Colum	nn 5, for state response. Not applicable	
2.	The undersigned issuer hereby undertakes to furnish to at (17 CFR 239.500) at such times as required by state law.	ny state administrator of any state in whi Not applicable	ch this notice is filed, a notice on Form D
3.	The undersigned issuer hereby undertakes to furnish to the offerees. Not applicable	ne state administrators, upon written requ	est, information furnished by the issuer to
4.	The undersigned issuer represents that the issuer is famil Offering Exemption (ULOE) of the state in which this exemption has the burden of establishing that these condit	notice is filed and understands that the	ne issuer claiming the availability of this
	e issuer has read this notification and knows the content lersigned duly authorized person.	is to be true and has duly caused this	notice to be signed on its behalf by the
Iss	uer (Print or Type)	Signature	Date
Bri	gadier Capital LP	LOUT, Leey	11-06
	me (Print or Type)	Title (Print or Type)	
Da	niel Munley	Secretary of the Investment M	lanager

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2	!	3		4				5
	Intend to non-acc investe Sta (Part B-	redited ors in ite	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of in	Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Class A & S Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AK									
AL									
AR									
AZ						<u> </u>			
CA									
СО		·							
CT									
DC									
DE							_		
FL					···				
GA			-		-				
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ID									
IL			- P. V. T	****					
IN									
KS									
KY					•				
LA									
MA		···							
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MN				-	-				
МО			·		 !				
MS									
MT						-			
NC	-				· · · · · · · · · · · · · · · · · · ·				

APPENDIX

1			3		5						
	Intend to		Type of security and aggregate			Not Applicable Disqualification under State ULOE (if yes, attach					
	invest		offering price			explanation of					
	Sta	te	offered in state	Type of i	Type of investor and amount purchased in State						
	(Part B-	Item 1)	(Part C-Item 1)		(Part E	-Item 1)					
			Class A & S Limited Partnership	Number of Accredited		Number of Non- Accredited					
State	Yes	No	Interests	Investors	Amount	Investors	Amount	Yes	No		
ND											
NE											
NH											
NJ		_		_							
NM											
NV							L				
NY		X	X	1	\$6,500,000	0	0				
ОН											
OK											
OR											
PA		X	X	3	\$31,450,000	0	0				
PR		1									
RI						· -					
SC											
SD											
TN											
TX				·		→					
UT											
VA			76.								
VI				<u></u>							
VT				· · · · · · · · · · · · · · · · · · ·					-		
WA								<u>. </u>			
WI											
WV						<u> </u>		***			
WY			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								